

New York Co-op Lender's Policy Application

INSTRUCTIONS:

1. Download this application to your computer.
2. Complete all relevant form fields and save.
3. Click the **SUBMIT** button to open an email addressed to UCCPlus, with your application attached.
4. If you have a draft security agreement/pledge agreement or structure chart available, please attach it to your email.

Upon receipt of your application, UCCPlus will contact you. If you have any questions, contact Gary Zimmerman at 1-312-223-2441 or Daniel Gross at 1-312-223-2735.

ORDER INFORMATION					
Application Date (MM/DD/YYYY)		Expected Closing Date (MM/DD/YYYY)		Amount of Insurance Requested	
LENDER INFORMATION					
LENDER			LENDER'S COUNSEL		
Company/Institution			Company/Firm		
Name of Primary Contact			Name of Primary Contact		
Phone	Email		Phone	Email	
COLLATERAL INFORMATION					
DEBTOR/PLEDGOR			DEBTOR/PLEDGOR'S COUNSEL		
Name of Debtor/Pledgor			Company/Firm		
COLLATERAL DESCRIPTION			Name of Primary Contact		
Number of Units			Phone	Email	
County Where Units are Located					
Note: Please attach a draft security agreement or structure chart when emailing your application to UCCPlus.					
TITLE INFORMATION					
Please provide information about the primary contact for title policies being issued as part of the same closing.					
Title Company		Phone		Email	
Name of Primary Contact					

SUBMIT